

Telephone 319 833-1749
Client Name Iowa Physical Therapy Association

RECEIVED

Date and location of function Tuesday, February 20, 2007 FEB 27 2008

IOWA GENERAL ASSEMBLY
FUNCTION REPORT (new)

HOUSE OF REPRESENTATIVES
CHIEF CLERK

TOTAL COST of function (includes in-kind expenditures)
This form must be filed within five business days following the date of the reception. This applies only to receptions held during the regular session where every member of the General Assembly is invited and the gift law exception applies. The form must be filed with the Secretary of the Senate or the Chief Clerk of the House, Statehouse, Des Moines, Iowa 50319. Source: Iowa Code section 68B.22(4)(r).

Lobbyist Name Corelei Heisinger
Address 411 Four Seasons Dr.
Waterloo IA 50309
Telephone 319 833-1249
Client Name Iowa Physical Therapy Association

Date and location of function Tuesday, February 20, 2007

Please provide the total amount expended, including in-kind expenditures, on food, beverage, and entertainment for the reception.

TOTAL COST of function (includes in-kind expenditures) -

Food	<u>789.75</u>
Beverage	<u> </u>
Entertainment	<u> </u>
Other	<u> </u>

Name Natalie Battles
Title
Signature [Signature]
Date: 2/26/07

ADVOCACY STRATEGIES